

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Tomohisa ARAI et al.

Title: GIANT MAGNETOSTRICTIVE  
MATERIAL AND  
MANUFACTURING METHOD  
THEREOF, AND  
MAGNETOSTRICTIVE  
ACTUATOR AND  
MAGNETOSTRICTIVE SENSOR  
THEREWITH

Appl. No.: Unassigned

Filing Date: FEB 09 2001

Examiner: Unassigned

Art Unit: Unassigned

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Commissioner for Patents  
Box PATENT APPLICATION  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Tomohisa ARAI  
Hideki YAMAMIYA  
Masami OKAMURA  
Tadahiko KOBAYASHI

☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (88 pages).
- ☒ Formal drawings (16 sheets, Figures 1-19).
- ☒ Unexecuted Declaration and Power of Attorney (4 pages).

☒ Claim for Convention of Priority and priority documents.

☒ Information Disclosure Statement.

☒ Form PTO-1449 with copies of 5 listed reference(s).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims	Rate	Fee Totals
Basic Fee						\$710.00	\$710.00
Total Claims:	36	-	20	=	16	x \$18.00	\$288.00
Independents:	4	-	3	=	1	x \$80.00	\$80.00
If any Multiple Dependent Claim(s) present:						+ \$270.00	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee						+ \$130.00	\$130.00
						SUBTOTAL:	\$1208.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):							\$0.00
						TOTAL FILING FEE:	\$1,208.00

☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.

☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

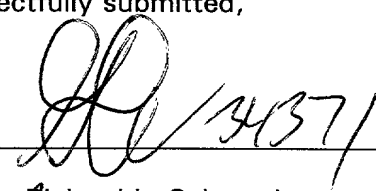
☐ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date FEB 09 2001

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